N13000000992

(Re	questor's Name)	_		
(Ad	dress)			
. (Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
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06/23/14--01031--004 **35.00

DIVISION OF CORPORATION

C. LEWIS

JUL 1 0 2014

EXAMINER

COVER LETTER

TO: Amendment Division of	Section Corporations		
SUBJECT: Key	Largo Ocean Resort Co	endominium Association orporation	
DOCUMENT NUM	ивек: N13	000000992	
The enclosed Statem	nent of Change of Registered Offic	e/Agent and fee are submitted for filing.	
Please return all cor	respondence concerning this matte	r to the following:	
_		ANCH, ESQURIE	
	Name of Co	ntact Person	
	015050150 011/504 11	VAAAN LEDNED ET AL	
-	SIEGFRIED, RIVERA, H Firm/Co	YMAN, LERNER, ET AL	
	201 Alhambra C	ircle, 11th Floor	
-	Add		
-	Coral Gable City/State at	s, FL 33134	
	City/State as	ld Zip Code	
	rblanch@srl		
1	E-mail address: (to be used for t	uture annual report notification)	
For further informat	ion concerning this matter, please	nall:	
1 of further informat	ion concerning this matter, piease	zaii.	
	bberto C. Blanch e of Contact Person	at (305) 442-3334 Area Code & Daytime Telephone	<u>4</u>
Nam	e of Confact Person	Area Code & Daytime Telephone	Number
Enclosed is a \$35.00	check made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ.	le
		Tallahassee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	e provisions of sections 607.0302, 617.0302, 607.13 lange is submitted for a corporation organized unde	er the laws of the State	of Florida	
	ler to change its registered office or registered agen		-	
	f the corporation: Key Largo Ocean Reso al office address: c/o Caribbean Property Mar			
	orida 33186	lagement, 12501	GVV 132 Court,	_
	address (if different): SAME			
4. Date of incor	rporation/qualification: 1/30/13 Doc	cument number:	N13000000992	
	nd street address of the current registered agent and a artment of State: (If resigned, enter resigned)	registered office on fil	e with the	
	SRHL LAW			
	201 Alhambra Circle, Eleventh Floor			
	Coral Gables, FL 33134		<u>_</u>	
6. The name an (if changed):	nd street address of the new registered agent (if chan	iged) and /or registered		TAT TAKE
	SKRLD, INC.		<u>3</u> cor	$\mathcal{Z}_{\mathcal{L}}$
	201 ALHAMBRA CIRCLE, 11th FLOOF	₹	23 AM 10: 38	٠
	P.O. Box NOT acceptable		 ယ	1 5
	CORAL GABLES, FL 33134			r G
The street addr as changed wil	ress of its registered office and the street address of its registered office and the street address of the identical.	of the business office	of its registered agent,	
Such change was authorized by	vas authorized by resolution duly adopted by its b the board, or the corporation has been notified in	oard of directors or b writing of the change	y an officer so	
	ture of an officer or director	Printed or typed name	and title	
//!!	of the appointment as registered agent and agree to comply with the provisions of all statutes relained I am familiar with and accept the obligation of the obligation of the colling the register is the notified in writing of this change.			
Lat		5/12/1		
Si	ignature of Registered Agent	Date	···	
If signing on b	pehalf of an entity:			
	A A. Lerner, Director Typed or Printed Name			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)